

**Arizona Department of Revenue • Litigation Unit**

PO Box 29070 • Phoenix, AZ 85038-9070

Telephone: (602) 716-6234

**TAX CLEARANCE APPLICATION****1. Applicant Information:**

APPLICANT NAME

DAYTIME PHONE NO. WITH AREA CODE

STREET ADDRESS

CITY

STATE

ZIP CODE

**2. Tax Clearance Purpose:** *Check only one box.*

CERTIFICATE OF COMPLIANCE FOR DISSOLUTION OR WITHDRAWAL:

- ☐ Dissolution of Corporation (not applicable to estate, trust, or individual application types)  
☐ Withdrawal from Arizona (not applicable to estate, trust, or individual application types)

LETTER OF GOOD STANDING:

- ☐ Sale of Business                      ☐ Gaming  
☐ Personal                                ☐ Healthy Forest Certification  
☐ Residency                              ☐ Motion Picture Production Incentive  
☐ Other: \_\_\_\_\_

**3. Application Type:** *Check only one box and provide tax identification number(s).*

- ☐ Corporation                              Federal Employer I.D. No.  
☐ S Corporation                              – OR –  
☐ Partnership                                AZ Transaction Privilege License No.  
☐ Tax Exempt Organization                              – OR –  
☐ Limited Liability Company                              AZ Withholding Tax License No.  
☐ Limited Liability Partnership  
☐ Estate                                        Social Security No.  
☐ Trust                                              – OR –  
☐ Individual                                    AZ Transaction Privilege License No.  
                                                            – OR –  
                                                            AZ Withholding Tax License No.

**4. Signature**

PRINT NAME

PRINT SPECIFIC TITLE (Corporate Officer, Partner, Individual)

SIGNATURE

DATE

**5. Mail application to:** Arizona Department of Revenue, Litigation Unit, PO Box 29070, Phoenix, AZ, 85038-9070.  
*Do not fax the application. Faxed applications will not be processed.****Be sure to sign the application. Unsigned applications will not be processed.******If your application cannot be approved, you must clear all deficiencies and resubmit an application.***

POWER OF ATTORNEY: If this application is submitted by anyone other than a corporate officer, general partner, or individual (sole proprietor), Arizona Form 285, *General Disclosure/Representation Authorization Form*, is required. Visit our web site at <http://www.azdor.gov> and click on the *Forms* link to obtain Form 285.